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IV.

A Case of Catalepsis Verminosa, cured by Oleum Terebinthinæ rectificatus. By F. WEAVER, of Walsall, Surgeon.

ON the first of June last I visited Mrs. C. She was of a delicate habit, and had frequently been subject to hysterical affections, from which being generally slight, she usually recovered without much medical assistance. A similar result was anticipated in the present instance; but the attack continued, without remission, longer than usual, and assumed a different character. Much alarm was therefore excited in the anxious minds of her relatives. On my arrival I found her on the couch, apparently in a state of insensibility. “*Corporis totius recepta forma, constans, flexilis, cum insensibilitate,*” *Catalepsis Linnæi*. The temperature of the body was considerably below the natural standard; but the diminution of animal heat could not be accurately ascertained, having no thermometer at hand. There was an entire suspension of all voluntary actions; the eyes were closed, the pupils much dilated, and insensible to light; *trismus maxilaris*, and the jaw was so firmly clenched as to preclude even the possibility of separation; respiration scarcely perceptible; a strong full pulse, indicative of increased excitement of the vascular system; but “*sine rubore faciei*”—“*sine stertore vel sonora respiratione.*” Recourse was had to various external stimuli; and phlebotomy was suggested as essentially requisite; but this was opposed. I was, however, about applying the bandage or fillet for venæsection, when the pulvis nicotianæ excited sneezing, and caused a separation of the maxilla inferior, which enabled me to give three grains of tartarized antimony. She articulated, and expressed disapprobation at my preparing to open a vein, and immediately relapsed.

A blister was applied, and mustard cataplasms; but without waiting the effects of these doubtful auxiliaries, I immediately abstracted thirty ounces of blood, conceiving there was a determination to the head, with compression, from some cause hitherto not ascertained. Before a third of the quantity was obtained, she revived, opened her eyes, moved the extre-

mities, and was raised up in bed; the vital fluid still flowing with a rapid current. She expressed much satisfaction and gratitude for the benefit received. The pulse maintained its strength and velocity till within two or three ounces of the quantity taken; it then became soft and feeble. A solution of magnesia sulphas was given every hour till it operated. It operated well: after which a volatile cordial draught was given. The cataplasms were removed, having excited much local irritation. The emetic acted soon after the bleeding.

June 2nd. She had a tolerable night, and continued mending; ordered the solution to be repeated every four hours, with a suitable regimen. The blister had done its duty.

June 3d. She was going on tolerably well, although rather languid; and had slept. The solution was omitted. In the evening I found her not so well; and apprehensive of a relapse, was about to request the attendance of Dr. Darwin of Litchfield; but during the night she became considerably better.

June 4th. No improvement; rather worse than yesterday. "Sopor constans cum insensibilitate, respiratio neque tacita"—a small, slow pulse. The remote cause of this tumult in the system was evidently not removed. Dr. Darwin visited the patient; and, from having recently had a similar case, he was of opinion that the disease was *catalepsis verminosa*, and that a tape-worm was the exciting cause. He ordered oleum terebinthinæ ʒij. statim sumendum. In a few hours a portion of a tænia, about eighteen inches in length, was expelled, besides many fragments; but, expecting some might be left behind, this specific was repeated, and more were evacuated. An opiate was administered at bed-time.

June 5th. She was considerably better—a draught was prescribed of decoct. aloes ʒij bis die.

June 6th. She continues her medicines, and is in good spirits; but much debilitated. The bowels being too lax, the aloetic draught was continued once a day. By the aid of gentle tonics, she was soon convalescent.

It is remarkable that my patient had never before experienced any inconvenience from the tænia. She had been subject to hysteric affections; but generally during uterine gestation only. From the appearance of the worm, I should imagine it was not of mature growth, its breadth being not more than one-sixth of an inch, and it was almost diaphanous.

It is astonishing that vermicular irritation should produce suspension of all voluntary and involuntary powers, and of sensation; and should induce so strong a vascular action, and determination to the head, as to threaten the extinction of life.